


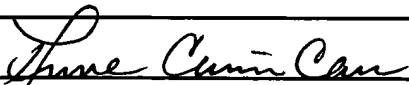
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PTO/SB/21 (09-04)

PTO TRANSMITTAL FORM DEC 23 2005 Patent & Trademark Office <small>to be used for all correspondence after initial filing</small>	Application Number	10/643,853
	Filing Date	August 19, 2003
	First Named Inventor	DAVID Y. CHIEN et al.
	Art Unit	1632
	Examiner Name	Unassigned
	Attorney Docket Number	PP16073.021 (2300-16073.10)
Total Number of Pages in This Submission		5

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input checked="" type="checkbox"/> Information Disclosure Statement Statement (2 pages) PTO/SB/08A List of Refs (1 page) Copy of one listed Reference (Pages not counted) <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Return Receipt Postcard (1 page)
Remarks The Commissioner is authorized to charge any additional fees to Deposit Account 18-1648.		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm Name	Robins & Pasternak LLP		
Signature			
Printed name	Roberta L. Robins		
Date	12/19/05	Reg. No.	33,208

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Signature			
Typed or printed name	Anne Currier Carr	Date	Dec. 19, 2005



Attorney Docket No. PP16073.021
2300-16073.10
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By: Anne Currier Carr
Anne Currier Carr

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of

CHIEN et al.

Examiner: Unassigned

Application No.: 10/643,853

Art Unit: 1632

Filed: August 19, 2003

Confirmation No.: 6313

For: HCV ANTIGEN/ANTIBODY COMBINATION ASSAY

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

**INFORMATION DISCLOSURE STATEMENT
UNDER 37 C.F.R. §1.97(b)**

Sir:

In accordance with the duty of disclosure set forth in 37 C.F.R. §1.56, Applicant(s) hereby submits the following information in conformance with 37 C.F.R. §§1.97 and 1.98.

- ☒ Pursuant to 37 C.F.R. §1.98, a copy of each document cited in the attached Form PTO-1449 is enclosed.
- ☐ No copies of the publications listed on the attached Form PTO-1449 are being provided pursuant to 37 C.F.R. §1.98(d) because the publications were previously cited by or submitted to the Office in prior Application Serial No. _____ to which the above-identified application claims priority under 35 U.S.C. §120.
- ☐ Publications listed on the attached Form PTO-1449 were cited in a foreign search or examination report corresponding to PCT application serial no. PCT/US01/19369 and mailed on April 14, 2003.

- ☐ Enclosed is a copy of a non-English publication(s) _____. Pursuant to §609 of the M.P.E.P., Applicant submits the attached foreign search or examination report, which cites such non-English language publication(s).
- ☐ Enclosed is a copy of a non-English publication(s) _____. English language publication _____ (copy enclosed) claims priority from this non-English publication.
- ☐ Enclosed is an explanation of non-English publication(s) _____ for which an English translation is not available.

This Information Disclosure Statement is filed within any one of the following time periods:

- ☐ within three months from the filing date of this national application other than a CPA under 37 C.F.R. § 1.53(d);
- ☐ within three months from the date of entry of the national stage as set forth in 37 C.F.R. § 1.491 in this international application;
- ☒ **before the mailing date of a first office action on the merits; or**
- ☐ before the mailing of a first office action after the filing of a request for continued examination under 37 C.F.R. § 1.114.

It is respectfully requested that the Examiner consider the above-noted information and return an initialed copy of the attached Form PTO-1449 to the undersigned.

Please direct all written communications in this application to:

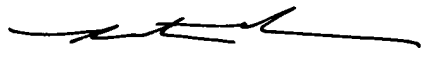
**Marcella Lillis, Ph.D.
Chiron Corporation
Intellectual Property – R440
P.O. Box 8097
Emeryville, CA 94662-8097**

Dated: 12/19/05

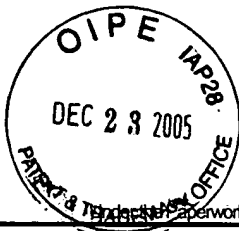
Respectfully submitted,

CHIRON CORPORATION
Intellectual Property – R440
P.O. Box 8097
Emeryville, CA 94662-8097
Tel: (510) 923-8406
Fax: (510) 655-3542

By:



Roberta L. Robins
Reg. No. 33,208



PTO/SB/08A (08-03)

Approved for use through 07/31/2006. OMB 0651-0031

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Substitute for form 1449A/PTO

INFORMATION DISCLOSURE STATEMENT BY APPLICANT

(use as many sheets as necessary)

Sheet 1 of 1

Complete if Known

Application Number	10/643,853
Filing Date	August 19, 2003
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Art Unit	1632
Examiner Name	Unassigned
Attorney Docket Number	PP16073.021 (230-16073.10)

U.S. PATENT DOCUMENTS+

Examiner Initials*	Cite No. ¹	Document Number	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear
		Number Kind Code ² (if known)			
	AA				
	AB				
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FOREIGN PATENT DOCUMENTS

Examiner Initials*	Cite No. ¹	Foreign Patent Document			Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear	T ⁶
		Country Code ³	Number ⁴	Kind Code ⁵ (if known)				
	BA	EP	0 388 232	A1	09/19/1990	Chiron Corp.		<input type="checkbox"/>
	BB							<input type="checkbox"/>
	BC							<input type="checkbox"/>
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	BK							<input type="checkbox"/>
	BL							<input type="checkbox"/>

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Date
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*EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

¹ Applicant's unique citation designation number (optional). ² Applicant is to place a check mark here if English language Translation is attached.